DOCUMENT RESUME

ED 469 412 PS 030 678

AUTHOR	Levenhagen, Kathryn A.
TITLE	Being Active at Child Care. Facilitator's Guide [and Videotape]. Active Me, Healthy Me.
PUB DATE	2002-09-00
NOTE	32p.; Produced by Plum Pictures. Videotape is not available from ERIC.
AVAILABLE FROM	United Learning, 1560 Sherman Avenue, Suite 100, Evanston, IL 60201 (13-minute videotape: $89). Tel: 800-323-9084 (Toll Free); Tel: 847-328-6700; Fax: 847-328-6706. For full text: http://www.unitedlearning.com.
PUB TYPE	Guides - Classroom - Teacher (052) -- Non-Print Media (100)
EDRS PRICE	EDRS Price MF01 Plus Postage. PC Not Available from EDRS
DESCRIPTORS	Caregiver Child Relationship; Child Care; *Child Health; Classroom Environment; Eating Habits; Educational Practices; Family Child Care; *Health Promotion; Modeling (Psychology); *Nutrition; Obesity; *Physical Activities; Physical Activity Level; *Physical Fitness; Prevention; Videotape Recordings; *Young Children

ABSTRACT

Noting that childhood obesity is a growing concern for parents, educators, and health care providers, this guide and videotape, "Being Active at Child Care," is from a three-part series, "Active Me, Healthy Me," exploring ways to keep children active while in child care settings. The 13-minute videotape demonstrates in both a child care center and a family child care home how a safe and activity-friendly environment can be arranged. Creative, safe, and age-appropriate activities for infants, toddlers, and preschoolers are demonstrated with an emphasis on helping children make physical activity part of a healthy lifestyle. Mealtimes in child care during which children are exposed to wholesome foods and a creative eating environment are also shown to exemplify the importance of good nutrition and role modeling in the development of healthy eating habits. The guide introduces the problem of childhood obesity and overweight, includes a narrative for the video, and provides student/audience objectives, a pretest and posttest, discussion questions, and viewer handouts. Handouts for viewers include kitchen safety guidelines, snacks children can help prepare, physical activities for children of various ages, ideas for making family-style dining successful, and resources to reinforce the benefits of physical activity, proper nutrition, and family-style dining. (KB)

Reproductions supplied by EDRS are the best that can be made
from the original document.

ED 469 412

Being Active at Child Care

from the series

Active Me, Healthy Me

Produced by
Plum Pictures

Facilitator's Guide
written by
Kathryn A. Levenhagen M.S., R.D.

Distributed by..

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL IN MICROFICHE, AND IN ELECTRONIC MEDIA FOR ERIC COLLECTION SUBSCRIBERS ONLY, HAS BEEN GHANTED BY

S. Levenhagen

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

2A

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

☑ This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

united learning
1560 Sherman Avenue | Suite 100 | Evanston IL 60201 | 800.323.9084 | FAX 847.328.6706 | www.unitedlearning.com

800.323.9084 | FAX 847.328.6706 | www.unitedlearning.com

BEST COPY AVAILABLE

PS 030 678

This video is the exclusive property of the copyright holder. Copying, transmitting, or reproducing in any form, or by any means, without prior written permission from the copyright holder is prohibited (Title 17, U.S. Code Sections 501 and 506).

© 2002 Plum Pictures

Active Me, Healthy Me
Being Active At Child Care

Table of Contents

Introduction To Program 1

Summary of Program 2

Instructional Notes 2

Student/Audience Preparation 2
Key Vocabulary Terms 3

Pre-Test and Post-Test 4

Student/Audience Objectives 4

Introducing the Program 5

Discussion Questions 7

View the Program 7

Description of Blackline Masters 7

Answer Key 8

Reference Materials 9

Script of Narration 10

CC This video is closed captioned.

The purchase of this program entitles the user to the right to reproduce or duplicate, in whole or in part, this teacher's guide and the blackline master handouts that accompany it for the purpose of teaching in conjunction with this program, **Being Active at Child Care.** This right is restricted only for use with this program. Any reproduction or duplication in whole or in part of this guide and the blackline master handouts for any purpose other than for use with this program is prohibited.

CLASSROOM/LIBRARY
CLEARANCE NOTICE

This program is for instructional use. The cost of each program includes public performance rights as long as no admission charge is made. Public performance rights are defined as viewing of a video in the course of face-to-face teaching activities in a classroom, library, or similar setting devoted to instruction.

Closed Circuit Rights are included as a part of the public performance rights as long as closed-circuit transmission is restricted to a single campus. For multiple locations, call your United Learning representative.

Television/Cable/Satellite Rights are available. Call your United Learning representative for details.

Duplication Rights are available if requested in large quantities. Call your United Learning representative for details.

Quantity Discounts are available for large purchases. Call your United Learning representative for information and pricing. Discounts, and some special services, are not applicable outside the United States.

Your suggestions and recommendations are welcome. Feel free at any time to call United Learning at 1-800-323-9084.

Being Active At Child Care
From the Series: Active Me, Healthy Me
Viewing Time: 13 minutes

INTRODUCTION

Childhood obesity is a growing concern for parents, educators, and health care providers. The number of overweight children has more than doubled over the past 20 years. (Being obese or overweight means that a child's weight is over the 95th percentile on the BMI-for-age charts for children (Body Mass Index). When a child's weight rises steeply in comparison to height, overweight or obesity may be indicated.

How does this happen? Research is showing that there are many reasons for children and adults becoming overweight. To some extent genetics determines our body shape and size. Our parents give us their genes for height, body build, and bone size. In addition, people metabolize food at various rates, which means we all use and store food differently in our bodies. Some people burn more calories than others while engaged in similar activities. Still, some people tend to be more physically active than others.

Because the rate of childhood obesity is increasing, scientists agree that the primary cause of overweight children is not genetic but environmental. In other words, what children are eating and doing contributes the most to the problem of childhood obesity and overweight. Surveys show that sedentary children are at risk for becoming sedentary adults. Likewise, poor eating habits seem to be established early in life. Obesity and overweight in adulthood are associated with many chronic health problems including diabetes, heart disease, and cancer. Furthermore, being overweight may contribute to social problems and low self-esteem, particularly during adolescence.

SUMMARY OF PROGRAM

Being Active At Child Care is part of the ***Active Me, Healthy Me*** series. In this program, keeping children active in child care is explored. Practical guidelines are provided for developing physical, cognitive, and social skills, skills which also move muscles, and improve strength and flexibility. ***Being Active at Child Care*** takes place in both a child care center and a family child care home. Ways to create a safe and "active-friendly" environment are shown by center directors, teachers, and family child care providers. Creative, safe, and age-appropriate activities for infants, toddlers, and preschoolers are demonstrated with an emphasis on helping children make physical activity part of a healthy lifestyle. Mealtimes in child care during which children are exposed to wholesome foods and a creative eating environment are also shown to exemplify the importance of good nutrition and role modeling in the development of healthy eating habits.

INSTRUCTIONAL NOTES

Before presenting these lessons to your students, we suggest that you preview the program, review the guide, and the accompanying Blackline Master activities in order to familiarize yourself with their content.

As you review the materials presented in this guide, you may find it necessary to make some changes, additions, or deletions to meet the specific needs of your class. We encourage you to do so; only by tailoring this program to your class will they obtain the maximum instructional benefits afforded by the materials.

STUDENT/AUDIENCE PREPARATION

Emphasize that childhood obesity is on the rise and poses lifelong health risks (visit the CDC reference outlining trends in childhood obesity and health risks).

N C H S - Health E Stats - Prevalence of Overweight Among Children and Adolescents: United States, 1999
National Center for Health Statistics, Center for Disease Control. This page also shows BMI charts for children.

Familiarize the audience with key vocabulary terms used in the program and lesson. Allow time to discuss challenges to keeping children active in child care.

Key vocabulary terms:

Obesity

• Childhood obesity means that a child's BMI (Body Mass Index) measures over the 95th percentile as indicated on specialized BMI Index Percentile-For-Age charts recently revised by a team of experts from the Center for Disease Control and Prevention.

N C H S - Health E Stats - Prevalence of Overweight Among Children and Adolescents: United States, 1999.
National Center for Health Statistics, Center for Disease Control.
http://www.cdc.gov/nchs/products/pubs/pubd/hestats/overwght99.htm
Explains national survey data about obesity and overweight trends for children and adults.

N C H S - 2001 News Release, National Center for Health Statistics, Center for Disease Control
http://www.cdc.gov/nchs/01news/overwght99.htm
Explains most recent survey data (as of 1999) about obesity and overweight increases between 1994 and 1999.

Chronic Disease

• Diseases that are associated with lifestyle patterns and behaviors. They are characterized by a slow onset and often continue for a lifetime. They may be treatable (some forms of cancer) or managed (heart disease, diabetes, hypertension).

BMI (Body Mass Index)
• A measure used to determine degrees of obesity and consequent risk for chronic disease. BMI=weight (kg)/height (m)2 (Refer to the BMI charts) N C H S - United States Growth Charts, http://www.cdc.gov/growthcharts/
National Center for Health Statistics, Center for Disease Control, 2000 CDC Growth Charts, United States.

Physical Activity
• Any activity which raises the heart beat above the resting metabolic rate. Physical activity is the major way to increase energy expenditure ("burning calories") and increases muscle strength, flexibility, and endurance. Physical activity has been shown to be a key factor in weight and disease management.

PRE-TEST and POST-TEST

Blackline Master #1, Pre-Test, is an assessment tool intended to gauge audience comprehension of the objectives prior to viewing the program. You can remind them that these are key concepts that they should focus on while watching the program. Ask specific members of the audience to explain their answer. Be positive in assessing the answers. Discuss each answer briefly explaining why it is mostly true or false.

Blackline Master #2, Post-Test, can be prepared to the results of the Pre-Test to determine the change in student/audience comprehension after participating in the activities and viewing the program.

STUDENT/AUDIENCE OBJECTIVES

After viewing the program and completing the follow-up activities, viewers should be able to:
• List positive ways to keep children active in the child care setting.

• Describe activities that support the development of gross and fine motor skills from infancy through the pre-school years.
• Identify the health and social problems associated with overweight and obesity.
• Discuss the role of caregivers in helping to slow down the rate of childhood obesity in the U.S. today.
• Describe the benefits of family-style dining and the importance of allowing children to serve themselves.
• Describe how to create an active friendly environment that is safe.

INTRODUCING THE PROGRAM

To make the program more meaningful, it is important for the audience to understand the critical nature of overweight and obesity. There will most likely be overweight and/or obese people in the audience making it uncomfortable to address the health risks associated with obesity. Obesity should be addressed as a condition that contributes to increased risk for health problems. Never refer to overweight or obese people as "fat." Refer to overweight and obesity in clinical terms, i.e., as defined by health professionals.

In adults, obesity is classified as a BMI of greater than 30. Overweight refers to a BMI of between 25 and 29.9. BMI is a measure of weight relative to height, and is used to monitor the associated risk of obesity and chronic disease. Chronic disease is the category of disease that is linked to lifestyle factors such as diet, level of physical activity, and exposure to toxins. The chronic diseases most often associated with obesity and overweight are cardiovascular disease (including, heart disease, hypertension, and stroke), diabetes, and some forms of cancer, obesity and overweight may contribute to sleep apnea and musculoskeletal problems (arthritis).

Overweight children do not show a greater risk for the development of these conditions any more than other

children. However, preventing overweight in childhood may eliminate many of the adverse health and economic consequences associated with obesity later in life. In addition to decreasing quality of life, adult obesity can cause premature death.

Overweight measures in childhood are different from overweight and obesity measures in adulthood. Obesity and overweight are not distinguished in childhood like they are in adulthood. BMI is the standard measure for both, but children's BMI measures are compared to a BMI-for-age chart developed by the Center for Disease Control and Prevention (CDCP) and based on the National Institute of Health (NIH) height for weight growth grids (please refer to the websites in the definitions). Children with a BMI above the 95th percentile are determined to be overweight or obese, and children with BMI of between the 85th and 95th percentile are at risk for obesity and may be considered overweight. It is noteworthy that a steep rise in BMI on the BMI-for-age growth grid is more indicative of obesity than height and weight measures on other growth grids which have steadily been at or near any percentile since birth or infancy.

Many factors contribute to the overall rise in childhood and adult obesity. Genetics play a role; however, that childhood obesity is rising regardless of age, sex, socioeconomic or ethnic background suggests that lifestyle factors play a much larger role in the onset of overweight and obesity. Poor diets, the inability for children to regulate their own food intake, a greater reliance on TV and computers for entertainment, and decreased community access to safe places for physical activities have all been indicated as reasons why childhood obesity is at epidemic levels in the United States today. This program will be most concerned with the effects that physical activity in child care have on obesity prevention. It will address the importance of role modeling healthy eating and physical activity behaviors so children can learn healthy lifestyle habits for the long term.

VIEW THE PROGRAM

Running Time: 13 minutes

DISCUSSION QUESTIONS

These questions appearing on **Blackline Master # 3** can be duplicated and distributed to the class. Following the program you may find it helpful to discuss the key concepts as a class. You may choose to use these questions to begin a discussion prior to viewing the program. Avoid answering questions directly; ask them higher-level questions allowing them to discover the answer as a group.

DESCRIPTION OF BLACKLINE MASTERS

Blackline Master #1, Pre-Test, is an assessment tool intended to gauge audience comprehension of the objectives prior to viewing the program.

Blackline Master #2, Post-Test, is an assessment tool to be administered after viewing the program and completing additional activities. The results of this assessment can be compared to the results of the Pre-Test to determine the change in audience comprehension before and after participation in this lesson.

Blackline Master #3, Discussion Questions and Answers, includes suggested topics for discussion that reinforce the importance of providing and modeling a variety of activities for children in order to establish a life of healthy habits.

Blackline Master #4, In the Kitchen With Kids, includes a list of kitchen safety guidelines, in order to prevent accidents while cooking with children.

Blackline Master #5, Snacks Children Can Help Prepare, includes a selection of fun, inexpensive, and healthy recipes that encourage children's participation in the kitchen.

Blackline Master #6, Resources, includes a list of books, curricula, and websites, for teachers and parents that reinforce the benefits of physical activity, proper nutrition, and family-style dining.

Blackline Master #7, Physical Activities for Infants, Toddlers, and Preschoolers, includes objectives and guidelines for incorporating developmentally appropriate activities for infants, toddlers, and preschoolers.

Blackline Master #8, Feeding Young Children in Group Settings, includes a list of ideas to help make "family style dining" a success.

ANSWER KEY

Blackline Master #1, Pre-Test

1. False
2. True
3. True
4. False
5. True
6. False
7. True
8. True
9. True
10. False

Blackline Master #2, Post-Test

1. True
2. True
3. False
4. False
5. False
6. chronic diseases
7. BMI (Body Mass Index)
8. family meals
9. physical activity
10. flexibility, strength, and endurance
11. Answers will vary though should include key points on the importance of creating an organized environment, with room to play. Safety measures should include looking at the environment from a child's perspective (getting down on the floor and looking closely at all possible dangers.) Some of the key safety concerns to look for include:

small objects that a child could choke on, sharp or pointy objects, tripping hazards, outlets without covers, materials cabinets without latches, cords or other objects that dangle.

REFERENCE MATERIALS

New Pediatric Growth Charts Released, USDA/ARS Children's Nutrition Research Center at Baylor College of Medicine. Available at: http://www.bcm.tmc.edu/cnrc/consumer/archives/growthcharts.htm.

Center on Aging, Childhood Obesity: A lifelong Threat, 3/02.

Safe Food for Children, Preventing Food Borne Illness in Child Care Centers and Family Child Care Homes. Washington State University Cooperative Extension and USDA, 2002, EB 1868.

Kids in Action: Fitness in Children, President's Council on Physical Fitness and Sports, 1992.

Physical Activity Guidelines for Infants and Toddlers, National Association for Sport and Physical Education (NASPE), 2002, Stock number 304-10254.

N C H S - Health E Stats - Prevalence of Overweight Among Children and Adolescents: United States, 1999
National Center for Health Statistics, Center for Disease Control. This page also shows BMI charts for children.

N C H S - 2001 News Release
National Center for Health Statistics, Center for Disease Control, "More American Children and Teens are Overweight."

N C H S - United States Growth Charts
CDC BMI-for-age growth charts can be downloaded PDF from this web site (also from the National Center for Health Statistics, CDC).

SCRIPT OF NARRATION

Benefits for an active child
These first five years are such an important time in children's lives, they are growing everyday: learning lifelong lessons, creating lifelong habits. And to grow and develop at their best, it is extremely important for young children to stay active. The benefits are enormous!

To do is to learn. To see is to learn. To touch and feel is to learn. To explore with your feet and explore with your hands, is to explore with your mind.

Large physical movements develop gross motor skills. Walking, running, climbing, jumping, and lifting helps promote flexibility, strength, balance, and endurance.

As a pediatrician, I see many young children who are already developing habits that can lead to being overweight or even obese. This may be setting them up for a lifetime of problems including diabetes, high blood pressure and heart disease. I tell parents, "To help your children create healthy habits for the rest of their lives, encourage them to eat healthy foods and stay active. Turn the TV, video games and computers off. Get up, get active, and have fun."

Smaller physical activities develop fine motor skills. Putting together puzzles, playing with toys, drawing, and coloring, will work the muscles in the hands and arms, and develop hand-eye coordination.

While active, children interact with others and develop socials skills. When children play with other children they learn about the needs and feelings of others, they learn how to cooperate, take turns, and have fun while sharing with others.

And staying active helps children develop self-esteem (graphic: Develop Self-Esteem) Too much television, video and computer games is precious time taken away from children experiencing their own imaginations, pre-tending, playing, exploring, and investigating their world.

Setting up an active-friendly environment
The first step to helping children stay active is to set up an active-friendly environment which means a place that's safe, organized, with room to play.

Safety must come first. Take the time to stop, look, and think about what and where are the potential dangers. Get down on your hands and knees, see things from a child's perspective. Make sure to avoid:
- sharp or pointed objects,
- cords or other objects that dangle,
- small objects that children could choke on,
- tripping hazards,
- outlets without safety covers,
- and materials cabinets without safety latches.

All day, everyday, indoors and out, we must constantly look out for these dangers.

The next step to an active-friendly environment is to be organized. Making a mess is a natural part of an active life. But so is cleaning up. It's important to let children clean up the messes they make, which, of course, is not always easy.

We keep the different toys and activities in the same places. The children know that when clean up time comes, the blocks go here, the food toys go here. Then when it's time to play again, they know right where to find them.

And the last step is: Find room to play. Even if space is limited, create areas to let their bodies and their imaginations run free. Sometimes it's fun to allow any room to be transformed into a fort or a castle.

An active-friendly environment allows children to safely explore, discover, be curious, and be active.

Helping children stay active

Now, the best way to help children stay active, is to be active yourself. Get down on the floor. Join them. You're an important role model and when they see you active, they will naturally want to join in the fun too.

We like to play together in a small group. I can watch all of the children while I take turns giving each special one-on-one time with me.

You will want to find age appropriate activities for all the kids.

For the real little ones, we have "tummy-time;" they stretch, roll, reach, grab, scoot and strengthen new muscles. Music really gets us going. Sometimes we sing. Or we clap and move around. It's great! They love balls. We play catch, at first we just roll the ball on the floor, later toss it a few inches, and before you know it, we bounce it high and chase after it.

I wish I had half their energy. I think that it's in their nature to move, really. So, we have to let them move. When we play games, they like to be involved. So we avoid games

in which some children are eliminated or must spend time not participating. So, we play games like follow the leader, and we set up obstacle courses.

The kids love freeze dance; they get to move, dance, be goofy, and everyone's involved. Then music stops! They freeze and can't move until the music starts again. And if we have races, for us, it's not really about who finishes first; it's just about moving and having fun. All of these activities help develop their social skills. They learn how to cooperate, work together, and have fun while sharing together.

With art, if you use a little creativity, you can find ways to get all the kids interested in creating art.

Sometimes we'll put the paper underneath the tables! They get down on the floor, lie on their backs and draw. And the kids love it when we get out the big paint rollers and giant paint brushes. They use their arms, their legs, all their muscles.

These kids are using all of their body muscles and their creative muscles. They're never too young to do art. Even the little ones, I let all my children begin to draw, or paint, or color. It's all in the process - that's how they learn.

Books. Reading can be a great activity no matter what the age. They like to hold the books or turn the pages. Often they like to stand and act out the stories they hear. And no doubt: Reading is a great way to get their imaginations active.

So the overall message is variety. Offer a variety of activities. Each child has different interests at different times. Naturally they won't always want to do whatever is placed in front of them. Children need choices. At any given time,

we'll have a variety of activities for the children to choose from; painting, dough, participating in a group game, observing, dressing up, digging, splashing, or building, destroying and rebuilding. Variety gives them the opportunity to pick which activity is most right for them at that time.

Kids need choices; it helps them to feel empowered and less frustrated.

And then when it's naptime, the kids are ready for a rest. Their bodies have gotten a work-out, their minds have gotten a work-out.

When the parents come, I think most of them know, "Hey, if my kid gets a little dirty, no big deal." It's a small price to pay for their getting all those life experiences.

I try when I can, to remind parents to stay active with their children. They can do most of what we do here. They can turn that TV off, play together, shop together, cook together, go to the parks together, and experience life together. It may take a little time and thought, but an active family can lead to a lifetime of healthy habits.

Eating right while staying active

Eating healthy, well-balanced meals is an important part of helping active children to grow and be their best. And with a little thought, you can even turn snacks and mealtimes into an activity itself.

Oh, they really enjoy it when they "fish for goldfish" or when they make bagel-faced sandwiches. At mealtime, we eat "family-style" and the kids serve themselves. They enjoy being involved.

Also, you should offer a variety of foods. Again, give them choice. You can encourage the children to try different

foods, but never force them. You know, some children simply don't like more than one food on their plate at a time, or to have their foods touch. Often children need to see a food 12-15 times before he or she is comfortable to give it a try.

I remind parents and child care providers to avoid junk food as much as possible. Instead of chips, soda, and candy, I suggest for snacks that they offer more fruit, yogurt, cheese, and vegetable slices. And instead of soda or fruit drinks, I suggest they serve 100% juice. And remember variety. Variety is the corner stone of good nutrition.

We have a garden in the back and the kids really enjoy helping with that. They love being outside and getting their hands dirty. Plus I think it helps them begin to understand the entire food process and appreciate the healthy foods that they put into their bodies. And children love to try the foods that they've grown!

Conclusion

We hope you've enjoyed learning with us the many benefits and methods to helping children stay active. Remember: Obesity is a national epidemic and you have an opportunity to create lifelong good habits.

Create an active-friendly environment that's safe, organized, with room to play.

Offer a variety of activities with choice.

Be involved. Participate right along with them.

And offer a variety of foods and eat with the children.

And remember, children learn by doing. Busy feet and busy hands filled with adventure, means busy and growing minds, filled with knowledge.

Name _____

BEING ACTIVE AT CHILD CARE
from the ACTIVE ME, HEALTHY ME series

PRE-TEST

Directions: Select true (T) or false (F) for each of the following statements.

1. Childhood obesity is declining in the United States. T F

2. Floor time for an infant is important for developing healthy activity habits later on in life. T F

3. Variety is one of the corner stones of good nutrition for children. T F

4. When it is raining outside it is acceptable for children to watch videos because it is difficult to arrange safe space for indoor activities. T F

5. Child care providers can help children adopt a physically active lifestyle early in life, which will help to ensure later participation in physical activity. T F

6. Involving children in food preparation is dangerous and should always be avoided. T F

7. Children should have a variety of activities that develop large and fine motor skills available through out their day. T F

8. It is important for child care providers to organize and participate in outside play activities with children. T F

9. It is more beneficial for children to engage in fine motor skill activities such as drawing, working on puzzles, and building blocks, than watching TV. T F

10. It is not the job of child care providers to inform parents about the health benefits of daily activity for children. T F

© 2002 Plum Pictures

All rights to print materials cleared for classroom duplication and distribution.

Published and Distributed by United Learning

Name _____

BEING ACTIVE AT CHILD CARE
from the ACTIVE ME, HEALTY ME series

POST-TEST

Directions: Choose T (true) or F (false).

1. Childhood obesity is on the rise in the United States. T F

2. The American Pediatrics Association recommends that TV, video, and computer time should be limited to less than two hours a day (regardless of the weather) for children over two. T F

3. Involving children in food preparation is dangerous and should always be avoided. T F

4. Genetics plays more of a role than lifestyle in the onset of childhood obesity. T F

5. If healthy food is served, children should be coerced into eating a little bit of everything. T F

Directions: Select the best word or phrase below to complete each question.

- family meals
- BMI
- physical activity
- flexibility, strength, and endurance
- chronic disease

6. Diabetes, hypertension, heart disease, and cancer are all examples of _____, and are associated with overweight, obesity, and lifestyle factors.

7. Childhood obesity is determined clinically by _____, which is a measure of weight, relative to height, and compared to established growth grids for children age 2-18.

8. Children who are part of _____tend to eat healthier foods and make better food choices.

9. _____involves moving large muscles and using energy.

10. Movement for at least 30 minutes a day helps minimize risk for chronic disease, contributes to weight management, and develops _____.

11. Short Answer

Directions: On the back of this sheet, or on separate piece of paper, briefly describe how to create an active friendly environment for children that is safe.

© 2002 Plum Pictures

Published and Distributed by United Learning

All rights to print materials cleared for classroom duplication and distribution.

Name _____

BEING ACTIVE AT CHILD CARE
from the ACTIVE ME, HEALTY ME series

DISCUSSION QUESTIONS AND ANSWERS

1. Childhood obesity and overweight is increasing in the United States.
Over the past 20 years the rate of childhood obesity has more than doubled. An estimated 13-14 % of children age 6-19 are overweight. A recent study showed that since 1973 children weigh 5 pounds more today and more kids are obese. (Nichlas T. American Journal of Epidemiology 2001; 153:969-977.) Obesity in adolescence is associated with increased risk of diabetes and hypertension. Obesity and overweight in adulthood is associated with all chronic diseases, musculoscelatal disease and sleep apnea, including diabetes, heart disease, and cancer.

2. Through role modeling and facilitation, parents and caregivers have an important role in helping children develop healthy lifestyle habits and appreciate all kinds of activity.
Parents and caregivers who maintain a healthy attitude toward eating and physical activity pass that attitude onto their children. Passing on healthy activity habits that children adopt as part of a lifestyle can help decrease the risk of developing chronic disease as an adolescent and adult. In general, the more physically active a person is, the longer a person can expect to live.

The rise of overweight children in the US may well be correlated to the increased number of hours they spend watching TV, or playing computer games. Studies show that babies watch close to an hour of TV a day and children watch an average of 27 hours of TV a week, or close to 4 hours a day. The American Academy of Pediatrics, recommends no TV/video watching for toddlers under 2, and limiting TV to less than two hours a day for all other ages. Even though more than half of all children over 6 have a TV in their bedroom, doctors are advising to remove them to the family room. Inactive time should be exceeded by active time for toddlers and preschoolers. Consider quiet activities other than videos, TV, or computer time, that allow children to play alone or with others, i.e., puzzles, drawing, building blocks, dress-up box, board or card games.

3. Floor time for an infant is important for strengthening muscles and supporting cognitive development.
Helping babies be active early in life increases the chances that they will learn to move skillfully. They will maximize their potential for both fine and gross motor skill development as they continue to grow. Encouraging early movement by putting infants on the floor helps them reach for toys and objects, helps strengthen neck and back muscles, and allows them the chance to discover their world. When adults interact with them on the floor they feel safe and motivated to explore their surroundings. Ideas for floor time activities with infants and older babies include: place brightly colored, easy to grasp toys at least the size of a baby's fist in front of infant to encourage reaching and grasping; wave a favorite toy just out of reach to support rolling over; roll squeezable balls gently toward and away from baby to encourage scooting and forward movement.

(Continued)

© 2002 Plum Pictures

Published and Distributed by United Learning

All rights to print materials cleared for classroom duplication and distribution.

Name _____

BEING ACTIVE AT CHILD CARE
from the ACTIVE ME, HEALTY ME series

DISCUSSION QUESTIONS AND ANSWERS *(continued)*

4. Activities for children should be balanced to help support and develop a wide range of skills: motor, social, and cognitive.

Bouncing, throwing, and chasing balls with toddlers will help to develop hand-eye coordination, as well as strengthen gross motor skills. Climbing, running, and jumping, develops coordination, flexibility, and strengthens a child's self esteem as they achieve new levels of accomplishment. While cutting with scissors, gluing objects together, drawing, and building helps to encourage the development of fine motor skills. Learning to take turns on play equipment, and while playing with blocks and small manipulatives, helps to encourage both fine and gross motor skills while teaching social skills as well. Through out the day, a variety of structured activities (team play, outdoor games, Simon-Says, dancing, and activities utilizing gross motor skills) and unstructured activities, (playground play, building with various objects, working with puzzles, arts and crafts, and activities utilizing fine motor skills) provide opportunities for a wide range of skill support and development.

5. Eating with the children and serving meals family style encourages children to make their own food choices and helps them to stay in touch with their internal cues for hunger and satiety (fullness).

There are many long-term benefits to eating together as a family either in the home or in the child care setting. When adults are present at the table they are able to teach children how to eat safely and avoid choking in practical ways by showing them how to take small bites, chew food before talking, and stay seated while eating. Many studies in child care centers and in the home show that children eat what adults eat. Adults can be role models to healthy eating by taking appropriate serving sizes, eating a variety of foods on the table, and encouraging children to try new foods through discussion and explanation.

Other studies suggest that children's food intake improves when they are allowed to serve themselves and take how much, and which foods, they want without interference from adults. Adults should be a participating presence during meal time, but should abide by the division of responsibility and let children decide what and how much food they take from a table full of healthy choices. When food is passed around the table, from person to person, children can best regulate their own food intake; hence, learn how much they want to eat depending on how hungry they are. Hunger is the best sauce for good eating. Feeling satisfied and full (satiety) is the best way to stop eating. Staying in touch with these important internal cues may help to maintain healthy eating patterns and contribute to sustaining a healthy weight for a lifetime.

© 2002 Plum Pictures

Published and Distributed by United Learning

All rights to print materials cleared for classroom duplication and distribution.

Name _____

BEING ACTIVE AT CHILD CARE
from the ACTIVE ME, HEALTY ME series

IN THE KITCHEN WITH KIDS
(Children Can Help, Learn, and Grow)

Young children learn by doing. Play and activities can involve all the senses. Involving children in food preparation encourages cooperation among children and results in a feeling of accomplishment. Using food in projects and activities sparks interest in a new food and gives opportunities for extending learning into the kitchen and dining areas. Food experiences allow other ways for adults to role model and help children establish and strengthen healthy lifestyle habits.

Whether a child is helping with a recipe or creating food art, some safety guidelines are important to follow when children handle food for consumption.

Safety in the Kitchen

Food Safety:

- Wash hands with soap and warm water before and after preparing and working with food.
- Do not leave cold or hot foods at room temperature for more than one hour.
- Practice "Take the one you touch" when children handle any food items.
- Provide child size utensils and mixing bowls.
- Work in clear, clean areas. (Use 1/4 teaspoon of bleach to 1 quart of water to sanitize food prep surfaces prior to use.)

Physical Safety:

- Adults should always be present when food is being prepared.
- Children should be seated when working, and walk in and out of the food prep area.
- Use a cutting board to chop foods.
- Adults should closely supervise knife use and operate all appliances.
- Appliances should be unplugged when not in use.
- Clean up spills immediately. Have paper towels close at hand.
- Use a pot holder when handling hot foods.
- Model for children safe kitchen habits, i.e., holding hot pads, proper knife use, wiping up spills, avoid hand to mouth contact.
- Organize the area used for food preparation and activities, and the foods for preparation prior to children entering the food area.
- Provide adequate work space for each child.
- Provide only age appropriate foods.

Never serve the following foods to children:

- Unpasteurized milk, dairy products, or fruit juice.
- Raw or undercooked meat, poultry, fish, eggs.

© 2002 Plum Pictures

Published and Distributed by United Learning

All rights to print materials cleared for classroom duplication and distribution.

Name _____

BEING ACTIVE AT CHILD CARE
from the ACTIVE ME, HEALTY ME series

SNACKS CHILDREN CAN HELP PREPARE

Flour Tortilla Roll-up (Wagon Wheels)
Spread whipped cream cheese on a whole wheat flour tortilla.
Add filling: grated cheese, lettuce or basil leaves, and sliced tomato, slices of red pepper.
Roll the tortilla up and slice into 1" pieces. Arrange in a circle on a plate.
Refrigerate until ready to serve.

Vegetable Chips and Dip

Green and yellow zucchini, cucumber, jicama chips.
Slice vegetables at a diagonal about 1/4" thick so they can be used as crackers.
Arrange on a platter.
Serve with Ranch or buttermilk dressing for dipping. (Instead of bottled dressing, buy the envelopes and add low-fat buttermilk and yogurt instead of mayonnaise.) Refrigerate until ready to serve.

Ants on a Log

Cut cleaned celery stalks into thirds.
Spread cream cheese into each piece.
Add raisins or dried cranberries to make the ants.
Arrange on a plate.

Trees in a Blanket
From refrigerator ready-made crescent rolls, roll each section out onto a cutting board.
Wash broccoli flowerets and cut into small pieces.
Grate cheddar cheese and mix with the broccoli pieces.
Add a tablespoon of cheese and broccoli to each rolled out crescent roll.
Roll them up and place on a cookie sheet. Follow directions for baking rolls.
Refrigerate until ready to serve. Reheat until warm if possible.

Fruit Kabobs

Prepare a yogurt dressing by stirring cinnamon and nutmeg into vanilla yogurt.
Wash and cut up an assortment of fruit, such as melon, watermelon (make melon balls!) mangoes, and nectarines.
Arrange on a large platter with grapes, berries, and pineapple chunks

Supply a package of thin or medium thick straws.

When ready to serve give each child a straw and a paper plate. Encourage each child to select the fruit they want to skewer onto the straws using a tong or fork to pick up the fruit. Serve with the yogurt dressing.

Moose Lips

Cut washed, red apples into thin slices and soak in orange juice for 5-10 minutes.
Spread 1/2 of the slices with peanut butter and arrange on a platter.
Top each with a few small marshmallows, then top with another apple slice. Refrigerate until ready to serve.

Bagel Face Sandwiches

Use mini bagels that have been halved. Spread each halve with cream cheese
Place assorted vegetables and fruits (shredded lettuce, thinly sliced red peppers, sliced strawberries, sliced carrots, halved cherry tomatoes, slivered cucumbers) on plates. Let children create a face on top of the cream cheese from the assorted fruits and vegetables.

Fishing For Goldfish
Use mini pretzel sticks as the fishing rod. Place several teaspoons of cream cheese on individual plates with goldfish crackers. Children dip the pretzel into the cream cheese and then try to "catch" the goldfish.

© 2002 Plum Pictures

Published and Distributed by United Learning

All rights to print materials cleared for classroom duplication and distribution.

Name _____

BEING ACTIVE AT CHILD CARE
from the ACTIVE ME, HEALTY ME series

RESOURCES
(BOOKS, CURRICULUM, WEB SITES)

Children's books that encourage active exploration:

The Little Red Hen, Paul Galadone, Clarion, 1973.

The Carrot Seed, Ruth Kraus, Harper Colins, 1989.

Eric Plants a Garden, Jean Hudlow, Albert Whitman&co.1971.

Wombat Stew, Marcia Vaugn, Silver Burdett, 1986.

Stone Soup, Ann McGovern, Scholastic Inc., 1986.

The Berenstain Bears and Too Much Junk Food, Stan and Jan Berenstain, Random House, 1985.

Cookbooks:

• *Pretend Soup and Other Recipes: A Cookbook for Preschoolers and Up*, Mollie Katzen, Ann Henderson, Tricycle Press / April 1994.

• *Connecticut Cooks for Kids (A Collection of Recipes from Childcare Providers Throughout Connecticut)* Ellen Shanley, Colleen Thompson, Susan Fiore, Karen Ritchie (Illustrator), Library Binding, University of Connecticut, Nutrition Education & Training Pr., October 1996.

Food Activity/Nutrition Education Curriculum

• *Do Carrots Help You See Better? A Guide to Food and Nutrition in Early Childhood Programs*, Julie Appleton, Nadine McCrea, Carla Patterson.
Helps children learn about food through play, stories, and games. Gives child care providers background information about the relationship between child development & growth and food & nutrition. Includes excellent parent handouts.

• *Nutrition Activities for Preschoolers*, Debbie Cryer, Adele Richardson Ray, Thelma Harms, Dale Seymour Publications, Parskppany, New Jersey, 1996. Includes reproducible handouts for training and parents.

• *Alphabet Snacks*, Elizabeth McKinnon, Totline Books, 2002. Twenty-five ideas for snacks, presented in alphabetical order intended to help children explore the letter sounds of foods they prepare and eat.

Childrens' Nutrition, Feeding, and Physical Activity On-line Resources

Guidelines for Safe Environments
Feeding Young Children in Group Settings
• http://www.aee.uidaho.edu/feeding
A great site for parent/child care provider staff, teachers. Excellent ideas, activities, and guidelines for trainings. Can also find numerous on-line resources and books. Sample of Resources from Feeding Young Children In Group Settings:

(Continued)

© 2002 Plum Pictures

Published and Distributed by United Learning

All rights to print materials cleared for classroom duplication and distribution.

Name _____

BEING ACTIVE AT CHILD CARE
from the ACTIVE ME, HEALTY ME series

RESOURCES
(BOOKS, CURRICULUM, WEB SITES) *(continued)*

Infant Nutrition

Special issues in feeding infants, i.e., allergies, intolerances etc.
- http://www.aap.org/policy/

Month by month feeding plan for baby's first year
- http://www.healthtouch.com/bin/EContent

National Network for Child Care, Adult Diets Don't Work for Babies
- http://www.nncc.org/Nutrition/adult.diet.html

Starting S0lids
- http://ificinfo.health.org/brochure/startsol.htm

Toddler Nutrition

ADA Feeding Infants and Toddlers Under Two Years
- http://www.eatright.org/nfs/nfs58.html

Experts: Nutritionist: Babies and toddlers: Moving to Foods/Juice
- http://www.parentsplace.com/exp/nutritionist/foodjuice/

Preschool Nutrition

ABC's of Feeding Preschoolers
- http://www.ext.vt.edu/pubs/preschoolnutr/348-009/348-009.html

Nutrition For The Preschool Child
- http://www.nncc.org/Nutrition/nutrition.pres.html

ADA Tip of the Day: Preschoolers Vs. Mom Who Knows Best?
- http://www.eatright.org/erm/erm111798.html

Feeding Guidelines for Children

Click on "Parent Information", Click on "The Feeding Relationship"
- http://www.zerotothree.org/parent.html?load=parent_intro.html

Promoting Pleasant Meals and Snacks
- http://www.foodsafety.ufl.edu/consumer/sd/sd025.htm

Experts: Nutritionist: Feeding Guidelines
- http://www.parentsplace.com

National Network for Child Care, Good Times at Mealtime
- http://www.nncc.org/Series/good.time.meal.html

USDA/ARS Children's Nutrition Research Center at Baylor College of Medicine, Great site addressing many issues in children's nutrition and health, including childhood obesity and determining BMI
- http://www.bcm.tmc.edu/cnrc/factsanswers.html

(Continued)

© 2002 Plum Pictures

Published and Distributed by United Learning

All rights to print materials cleared for classroom duplication and distribution.

Name _____

BEING ACTIVE AT CHILD CARE
from the ACTIVE ME, HEALTY ME series

RESOURCES
(BOOKS, CURRICULUM, WEB SITES) *(continued)*

Fruits and Vegetables

Dole 5 A Day - Nutrition Education for Kids, Teachers, and Parents
- http://www.dole5aday.com/

Fruits and Vegetables: Eating Your Way to 5 A Day
- http://www.pueblo.gsa.gov/cic_text/food/eating5-aday

Healthy Habits

USDA/ARS Children's Nutrition Research Center at Baylor College of Medicine, Eat right establishing good nutritional habits
- http://www.bcm.tmc.edu/cnrc/eatright.htm

Helping Children Eat Right- Questions and Answers
- http://ificinfo.health.org/insight/helping.htm

National Network for Child Care, Family Nutrition Guide To Promote Healthy Habits and Promoting Good Food Habits
- http://www.nncc.org/Nutrition/fam.nutr.gd.html

Welcome to TV Turnoff Network
- www.tvturnoff.org,

Recipes

Family: Cooking/Recipes
- http://www.parentsplace.com/family/recipes/

NNCC Recipes for Kids
- http://www.nncc.org/Nutrition/recipe.kid.html

Tiny Tummies Good Food for Growing Families Newsletter
- http://wwwTinyTummies.com

Physical Activity for Kids

Dole 5-A-Day site
- http://www.dole5aday.com/

Fun with Food
- http://www.funwithfood.com/

Kidshealth
- http://www.kidshealth.org/kid/

Nutrition for Kids
- http://nutritionforkids.com/

Pearbear Healthy Kids
- http://www.usapears.com/pbnw-kids.html

Smart Kids Health Zone
- http://www.kidfood.org/

© 2002 Plum Pictures

All rights to print materials cleared for classroom duplication and distribution.

Published and Distributed by United Learning

Name _____

BEING ACTIVE AT CHILD CARE
from the ACTIVE ME, HEALTY ME series

PHYSICAL ACTIVITIES FOR INFANTS, TODDLERS, AND PRESCHOOLERS

Activities for Infants

Objective: To promote exploration of the environment. Provides opportunities for interaction between infant and caregiver.

Guidelines:

◆Place infant in safe area for "tummy time." Lay child on stomach on a clean 5-by-7 foot blanket to encourage lifting of head. Place clean, easy to grasp, squeezable toys in front of the infant to encourage reaching and grasping.

◆Dangle or roll age-appropriate toys gently in front of the child. Softly tell the infant what you are doing and explain what the object is.

◆Facilitate movement skills, and rolling over, by placing objects close but not within reach of the child as they show abilities to scoot forward.

◆Alternate objects to encourage exploration of varied shapes, colors, and sizes. Play peek-a-boo and pat-a-cake and alternate floor time with rocking and holding the child.

Activities for Toddlers

Objective: To promote development of movement skills through structured activities and on-going play that will provide building blocks for future, more complex movement.

Guidelines:

◆Provide at least 30 minutes of structured activity per day which uses large muscles:

◆Dancing to music promotes body awareness and balance.

◆Climbing stairs or slide ladders while holding adult's hand develops leg muscles and coordination.

◆Bouncing, throwing, and chasing balls helps develop hand-eye coordination.

◆Play "twister" and bridge" type games where the child goes underneath, over, and around the adult while in various positions.

◆Play "Simon Says" and sing songs that teach about body parts and encourage stretching and jumping.

◆Try to provide outdoor activities and play time often so children get used to being outside in all kinds of weather.

◆Engage in unstructured physical activity through play, and other movement, to develop fine motor skills and avoid sedentary time for more than one hour except when sleeping.

◆Provide interactive board books, building blocks, and large pieced puzzles. Read in between activities.

◆Engage children in painting large pictures outside or on the floor, which use the entire arm in addition to hands.

◆Allow children to help with food preparation either in the kitchen or in sanitized play areas. Help children skewer fruit onto straws, mix and stir, and make simple shapes out of dough. *(Continued)*

© 2002 Plum Pictures

Published and Distributed by United Learning

All rights to print materials cleared for classroom duplication and distribution.

Name _____

BEING ACTIVE AT CHILD CARE
from the ACTIVE ME, HEALTY ME series

PHYSICAL ACTIVITIES FOR INFANTS, TODDLERS, AND PRESCHOOLERS *(continued)*

Activities for Preschoolers

Objectives: To practice movement skills in a variety of activities and settings. Provide positive reinforcement to help ensure that children develop gross and fine motor skills before entering school.

Guidelines:

◆Provide 30-60 minutes of structured physical activity that reinforces the use of large and fine motor skills.

◆Climbing on play equipment, mounds of dirt or sand, or grassy hills and running as part of a game provides vigorous activity and supports endurance.

◆Walking on a straight line or a wide sidewalk curb with an adult promotes balance.

◆Hopping on one foot, and then two feet, and then one foot again supports balance and strengthens leg muscles.

◆Lay out objects to create a maze, or suggest running around a series of trees mastering turns and large muscle coordination.

◆Avoid competitive games that can leave preschoolers frustrated and later block their interest in sports. Preschoolers lack the social and cognitive development for organized team sports.

◆Provide opportunities for quiet play and unstructured activities so no more than 60 minutes a day is sedentary time (in front of a video or TV).

◆Age-appropriate puzzles, books, building blocks and other small manipulatives should be within the child's reach. Encourage children to clean up after using toys by making clean-up a game or by singing a song.

◆Set aside large in-door play and arts and craft areas, which allow children to spread out and contributes to their exploration.

◆Drawing, cutting, pasting, and copying activities, as well as, board and card games, facilitate fine motor skill development and contribute to problem solving.

◆Help children learn how to serve themselves during meals and snacks to further develop eye-hand coordination, enhance communication skills, and instill a sense of autonomy.

◆Allow children in the kitchen (under supervision) to help measure ingredients; wash and cut fruits and vegetables; stir, mix, and ladle batter into muffin tins; grate cheese, layer lasagna, and flatten pizza dough.

◆Help children make a garden from start to finish: dig the ground, fill with compost, plan the garden, buy seeds, plant seeds, water daily, thin, weed and pick the vegetables. Make a garden pizza or salad with garden ingredients.

© 2002 Plum Pictures

Published and Distributed by United Learning

All rights to print materials cleared for classroom duplication and distribution.

Name _____

BEING ACTIVE AT CHILD CARE
from the ACTIVE ME, HEALTY ME series

FEEDING YOUNG CHILDREN IN GROUP SETTINGS

The Division of Responsibility in Feeding Young Children

When children decide what and how much food they eat, they stay in touch with their internal regulators. When children eat according to their own cues, they eat when they are hungry and stop when they are full, and hence, tend to eat just the right amount of food they need for healthy growth and development.

Parents and Caregivers are Responsible For:

What Foods are offered

- Choose and serve healthy foods most often.
- Provide balance and variety during meals and snacks.

When the Food is Offered

- Offer a variety of snacks in between meals so children eat not more than every 2 hours and not less than every 3 ½ hours.
- Avoid allowing children to graze all day.

Where the Food is Offered

- Provide an eating space where children can comfortably sit while eating.

Children are Responsible for:

What Foods They Eat

- When introducing a new food, serve at least one other well excepted food.
- Avoid pitting foods against each other.

How Much They Eat

- Encourage children to eat by sitting and eating with them.
- Role model serving sizes, table manners, and etiquette.
- Consider family style dining where children pass the food around the table.

Whether They Eat at All

- Establish an eating schedule and stick to it.
- Remind children food will be offered again at the next snack or meal time.
- Never force, and avoid bribing a child to eat.

Considerations When Serving Family-Style:

Family style means passing food around the table and puts the responsibility of feeding children into practice.

- Establish a Mealtime Routine:

Wash hands, children help set the table, minimize waiting once children are seated, provide child sized utensils and serving dishes, each child has enough space to eat.

- Sit down and Eat with the Children:

Supervise serving, and role model a child sized serving size, assure children more food is available, teach "take what you think you will eat," practice "take the one you touch," talk with children while eating.

© 2002 Plum Pictures

All rights to print materials cleared for classroom duplication and distribution.

Published and Distributed by United Learning

U.S. Department of Education
Office of Educational Research and Improvement (OERI)
National Library of Education (NLE)
Educational Resources Information Center (ERIC)

REPRODUCTION RELEASE

(Specific Document)

I. DOCUMENT IDENTIFICATION:

Title: Being Active at ChildCare Active Me, Healthe Me Series	
Author(s): Plum Pictures	
Corporate Source: United Learning	Publication Date: Sept. 2002

II. REPRODUCTION RELEASE:

In order to disseminate as widely as possible timely and significant materials of interest to the educational community, documents announced in the monthly abstract journal of the ERIC system, *Resources in Education* (RIE), are usually made available to users in microfiche, reproduced paper copy, and electronic media, and sold through the ERIC Document Reproduction Service (EDRS). Credit is given to the source of each document, and, if reproduction release is granted, one of the following notices is affixed to the document.

If permission is granted to reproduce and disseminate the identified document, please CHECK ONE of the following three options and sign at the bottom of the page.

The sample sticker shown below will be affixed to all Level 1 documents

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL HAS BEEN GRANTED BY

Sample

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

1

Level 1 ☐

Check here for Level 1 release, permitting reproduction and dissemination in microfiche or other ERIC archival media (e.g., electronic) and paper copy.

The sample sticker shown below will be affixed to all Level 2A documents

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL IN MICROFICHE, AND IN ELECTRONIC MEDIA FOR ERIC COLLECTION SUBSCRIBERS ONLY, HAS BEEN GRANTED BY

Sample

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

2A

Level 2A ☒

Check here for Level 2A release, permitting reproduction and dissemination in microfiche and in electronic media for ERIC archival collection subscribers only

The sample sticker shown below will be affixed to all Level 2B documents

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL IN MICROFICHE ONLY HAS BEEN GRANTED BY

Sample

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

2B

Level 2B ☐

Check here for Level 2B release, permitting reproduction and dissemination in microfiche only

Documents will be processed as indicated provided reproduction quality permits.
If permission to reproduce is granted, but no box is checked, documents will be processed at Level 1.

I hereby grant to the Educational Resources Information Center (ERIC) nonexclusive permission to reproduce and disseminate this document as indicated above. Reproduction from the ERIC microfiche or electronic media by persons other than ERIC employees and its system contractors requires permission from the copyright holder. Exception is made for non-profit reproduction by libraries and other service agencies to satisfy information needs of educators in response to discrete inquiries.

Sign here, → please

Signature: Susan Levenhagen	Printed Name/Position/Title: Susan Levenhagen, Product Development Manager
Organization/Address: United Learning 1560 Sherman Ave Suite 100 Evanston, IL 60201	Telephone: 847 328 6700 FAX: 847 328 6706 E-Mail Address: slevenhagen@unitedlearning.com Date: 10/7/02

(over)

III. DOCUMENT AVAILABILITY INFORMATION (FROM NON-ERIC SOURCE):

If permission to reproduce is not granted to ERIC, *or*, if you wish ERIC to cite the availability of the document from another source, please provide the following information regarding the availability of the document. (ERIC will not announce a document unless it is publicly available, and a dependable source can be specified. Contributors should also be aware that ERIC selection criteria are significantly more stringent for documents that cannot be made available through EDRS.)

Publisher/Distributor:	United Learning
Address:	1560 Sherman Avenue Suite 100 Evanston, Il. 60201 www.unitedlearning.com
Price:	$89.00

IV. REFERRAL OF ERIC TO COPYRIGHT/REPRODUCTION RIGHTS HOLDER:

If the right to grant this reproduction release is held by someone other than the addressee, please provide the appropriate name and address:

Name:	
Address:	

V. WHERE TO SEND THIS FORM:

Send this form to the following ERIC Clearinghouse:	Karen E. Smith, Assistant Director ERIC/EECE Children's Research Center University of Illinois 51 Gerty Dr. Champaign, IL 61820-7469

However, if solicited by the ERIC Facility, or if making an unsolicited contribution to ERIC, return this form (and the document being contributed) to:

ERIC Processing and Reference Facility
4483-A Forbes Boulevard
Lanham, Maryland 20706

Telephone: 301-552-4200
Toll Free: 800-799-3742
FAX: 301-552-4700
e-mail: info@ericfac.piccard.csc.com
WWW: http://ericfacility.org

EFF-088 (Rev. 2/2000)